PAGE 1 / 25

Image# 202005069232368798

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

I OKWI 3X	For Other Than An Aut	horized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, tover the lines.	ype 12FE4M5
NEW REPUBLICAN F	PAC		
ADDRESS (number and street)	204 S MONROE ST. SUITE	201-A	
▼ Check if different			
than previously reported. (ACC)	TALLAHASSEE		FL 32301
2. FEC IDENTIFICATION N	IUMBER ▼ CIT	Y ▲	STATE ▲ ZIP CODE ▲
C C00544544		S THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:		20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) (Non-Colly) (Non-Colly) (Non-Colly)
(a) Quarterly Reports:			20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) 0 (M7) Oct 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (O1)	_	
July 15 Quarterly Report ((C) 12-Day PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Report for the:	Convention (12C)	
January 31 Year-End Report (YE) Election	on on	in the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	on (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Repor (TER)		on on	in the State of
5. Covering Period	01 01 2020	through	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined t	this Report and to the best of Collins, Gentry, , ,	my knowledge and belie	f it is true, correct and complete.
Type or Print Name of Treasur			
Signature of Treasurer ———————————————————————————————————	lins, Gentry, , ,	[Electronically File	ad] Date 05 / 06 / 2020
NOTE: Submission of false, erro	neous, or incomplete information	n may subject the person s	signing this Report to the penalties of 52 U.S.C. § 3010
Office Use Only			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)	F RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
NEW REPUBLICAN PAC		
Report Covering the Period: From: 01	01 2020	To: 03 / 31 / 2020
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2020		169317.44
(b) Cash on Hand at Beginning of Reporting Period	169317.44	
(c) Total Receipts (from Line 19)	75.00	75.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	169392.44	169392.44
7. Total Disbursements (from Line 31)	159135.42	159135.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10257.02	10257.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	41050.84	
This committee has qualified as a multicar	ndidate committee. (see FEC FORM 1M)	
F	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

NEW REPUBLICAN PAC

Report Covering the Period: From:	01 2020	To: 03 31 2020		
I. Receipts	I. Receipts COLUMN A			
	Total This Period	Calendar Year-to-Date		
Contributions (other than loans) From: (a) Individuals/Persons Other				
Than Political Committees				
(i) Itemized (use Schedule A)	0.00	0.00		
(i) Romizou (uso conoculo / i)	75 1 75 1 75 1			
(ii) Unitemized	75.00	75.00		
(iii) TOTAL (add				
Lines 11(a)(i) and (ii)▶	75.00	75.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees				
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry	75.00	75.00		
Totals to Line 33, page 5)▶	75.00	75.00		
2. Transfers From Affiliated/Other		0.00		
Party Committees	0.00	0.00		
	0.00	0.00		
3. All Loans Received	0.00	0.00		
		0.00		
Loan Repayments Received	0.00	0.00		
5. Offsets To Operating Expenditures				
(Refunds, Rebates, etc.)	0.00	0.00		
(Carry Totals to Line 37, page 5)	0.00	0.00		
6. Refunds of Contributions Made				
to Federal Candidates and Other Political Committees	0.00	0.00		
7. Other Federal Receipts	0.00	0.00		
(Dividends, Interest, etc.)	0.00	0.00		
B. Transfers from Non-Federal and Levin Funds	0.00	0.00		
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(4 4	4 4		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(b) Levill Fullus (IIOIII Schedule FIS)	45 45 45	45 45 45		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
(c) Total Manololo (add To(a) and To(b))	3.00			
O. Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	75.00	75.00		
). Total Federal Receipts	75.00	75.00		
(subtract Line 18(c) from Line 19)▶	75.00	75.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	Total This Period			
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	7 7			
Expenditures	0.00	0.00		
(c) Total Operating Expenditures	0.00	0.00		
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0.00	0.00		
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures (use Schedule E)	0.00	0.00		
Coordinated Party Expenditures	0.00	0.00		
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	4 4	4 4 4		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	159135.42	159135.42		
Federal Election Activity (52 U.S.C. § 30101((a) Allocated Federal Election Activity (from Schedule H6)	20))			
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00		
Entirely With Federal Funds	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	159135.42	159135.42		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	159135.42	159135.42		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	75.00	75.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75.00	75.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)		FOR LINE NUMBER: PAGE 6 OF 25 (check only one)		
TI LIVIIZED DISBURSEMENTS		category of the Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC					
Full Name (Last, First, Middle Initial) A. HOLTZMAN VOGEL				Date of Disbursement	
Mailing Address 45 NORTH HILL DRIVE STE 100				02 07 2020	
WARRENTON	State VA	Zip Code 20186		FEC Identification Number	
Purpose of Disbursement LEGAL CONSULTING Candidate Name			001	Transaction ID : SB29.4319	
Office Sought: House Disburser	ment For:		Category/ Type	Amount of Each Disbursement this Period 1428.75	
President	Primary Other (spec	General ify) ▼		Memo Item	
State: District: Full Name (Last, First, Middle Initial) B. HOLTZMAN VOGEL		Date of Disbursement			
Mailing Address 45 NORTH HILL DRIVE STE 100				02 07 2020	
City WARRENTON Purpose of Disbursement LEGAL CONSULTING	State VA	Zip Code 20186		FEC Identification Number	
Candidate Name			001 Category/ Type	Transaction ID : SB29.4320 Amount of Each Disbursement this Period	
Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spec	General ify)		3131.25 Memo Item	
Full Name (Last, First, Middle Initial) C. HOLTZMAN VOGEL				Date of Disbursement	
Mailing Address 45 NORTH HILL DRIVE STE 100				02 07 2020	
City WARRENTON Purpose of Disbursement	State VA	Zip Code 20186		FEC Identification Number	
LEGAL CONSULTING Candidate Name			001 Category/ Type	Transaction ID : SB29.4321 Amount of Each Disbursement this Period	
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General ify) ▼		1676.25 Memo Item	
State: District:					
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				6236.25	

for each category of the Detailed Summary Page	21b	FOR LINE NUMBER: PAGE 7 OF 25 (check only one)		
	28a	22 23 26 27 28b 28c x 29 30b		
		on for the purpose of soliciting contributions o solicit contributions from such committee.		
		Date of Disbursement		
		02 07 2020		
State Zip Code VA 20186		FEC Identification Number		
	001	Transaction ID : SB29.4322		
nent For:	Category/ Type	Amount of Each Disbursement this Period 1976.25		
Primary General Other (specify) ▼		Memo Item		
State: District: Full Name (Last, First, Middle Initial) B. NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE				
State Zip Code VA 22314		FEC Identification Number		
	Category/	Transaction ID : SB29.4291 Amount of Each Disbursement this Period		
nent For: Primary General Other (specify)		18012.93 Memo Item		
		Date of Disbursement		
		03 24 2020		
State Zip Code VA 22314		FEC Identification Number		
	002 Category/ Type	Transaction ID : SB29.4292 Amount of Each Disbursement this Period		
nent For:		3769.58		
	ent For: Primary General Other (specify) ent For: Primary General Other (specify) General Other (specify)	VA 20186 O01 Category/ Type ent For: Primary General Other (specify) ▼ tate Zip Code 22314 O04 Category/ Type ent For: Primary General Other (specify) Category/ Type ent For: Primary General Other (specify) Category/ Type category/ Type category/ Category/		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LINE NUMBER: PAGE 8 OF 25 (check only one) 21b 22 23 26 27 28c 29 30b		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b			
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)	and address of any politi	oar committee to	, someti contributions from such confinitee.		
NEW REPUBLICAN PAC					
Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC			Date of Disbursement		
Mailing Address 815 SLATERS LANE			03 24 2020		
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number		
Purpose of Disbursement TRAVEL EXPENSES		002	Transaction ID : SB29.4293		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify) ▼		2248.68		
State: District:			Memo Item		
Full Name (Last, First, Middle Initial) B. NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE			Date of Disbursement O3 24 2020		
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number		
Purpose of Disbursement BOOKLET PRINTING	22011	004	C		
Candidate Name		Category/ Type	Transaction ID: SB29.4294 Amount of Each Disbursement this Period		
Senate	ement For: Primary General		2117.29		
State: President District:	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial) C. NEW REPUBLICAN, LLC			Date of Disbursement		
Mailing Address 815 SLATERS LANE			03 24 2020		
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number		
•	Purpose of Disbursement PRINTING - ADVERTISING/MARKETING BOOKLET 004				
	ement For:	Category/ Type	Amount of Each Disbursement this Period 904.12		
Senate President	Primary General Other (specify)		Memo Item		
State: District:					
SUBTOTAL of Disbursements This Page (optional)		·····•	5270.09		
TOTAL This Period (last page this line number only	y)	·····•			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	\ I -	FOR LINE NUMBER: PAGE 9 OF 25 (check only one) 21b 22 23 26 27 28c 29 30b		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b			
Any information copied from such Reports and State or for commercial purposes, other than using the national commercial purposes.					
NAME OF COMMITTEE (In Full)	me and address of any poin	iicai committee t	Jonet Continuations from Such Committee.		
NEW REPUBLICAN PAC					
Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC			Date of Disbursement		
Mailing Address 815 SLATERS LANE			03 24 2020		
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number		
Purpose of Disbursement TRAVEL EXPENSES		002	Transaction ID : SB29.4296		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President		2640.03			
State: District:	Other (specify) ▼		Memo Item		
Full Name (Last, First, Middle Initial) B. NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE	Date of Disbursement Output Date of Disbursement Date of Disbursement 2020				
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number		
Purpose of Disbursement MARKETING BOOKS		004	C		
Candidate Name		Category/ Type	Transaction ID: SB29.4298 Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President	ment For: Primary		1352.72		
State: District:	, , , , , , , , , , , , , , , , , , , ,		Memo Item		
Full Name (Last, First, Middle Initial) C. NEW REPUBLICAN, LLC			Date of Disbursement		
Mailing Address 815 SLATERS LANE			03 24 2020		
City ALEXANDRIA	State Zip Code VA 22314	1	FEC Identification Number		
Purpose of Disbursement TRAVEL EXPENSES Candidate Name	Transaction ID : SB29.4299 Amount of Each Disbursement this Period				
	ement For:	Category/ Type	2377.72		
Senate President	Primary General Other (specify)		Memo Item		
State: District:			_		
SUBTOTAL of Disbursements This Page (optional).		·····•	6370.47		
TOTAL This Period (last page this line number only	·)				

SCHEDULE B (FEC Form 3X)	Use senarate	Llos concrete cohodulo(s)		FOR LINE NUMBER: PAGE 10 OF 25 (check only one)		
ITEMIZED DISBURSEMENTS	for each categ			one) 22 23 26 27 28b 28c x 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)	ino and address (or arry political	COMMINICE IO	Solicit Contributions from Such Committee.		
NEW REPUBLICAN PAC						
Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC				Date of Disbursement		
Mailing Address 815 SLATERS LANE				03 24 2020		
City ALEXANDRIA		Code 2314		FEC Identification Number		
Purpose of Disbursement ADMINISTRATIVE CONSULTING			001	Transaction ID : SB29.4300		
Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	General ▼		20833.34 Memo Item		
State: District:	1			Memo item		
Full Name (Last, First, Middle Initial) 3. NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City ALEXANDRIA	1 '	Code 2314		FEC Identification Number		
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Γ	001	C Transaction ID : SB29.4301		
Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President	Primary Other (appoint)	General		20833.34		
State: District:	Other (specify)			Memo Item		
Full Name (Last, First, Middle Initial) C. NEW REPUBLICAN, LLC				Date of Disbursement		
Mailing Address 815 SLATERS LANE				03 24 2020		
City ALEXANDRIA		Code 2314		FEC Identification Number		
Purpose of Disbursement TRAVEL EXPENSES		[002	Transaction ID : SB29.4302		
Candidate Name Office Sought: House Disburse	mont For		Category/ Type	Amount of Each Disbursement this Period 1667.73		
Senate President	Primary Other (specify)	General ▼		Memo Item		
State: District:						
SUBTOTAL of Disbursements This Page (optional).			·····•	43334.41		
TOTAL This Period (last page this line number only	·)					

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LINE NUMBER: PAGE 11 OF 25 (check only one)			
ITEMIZED DISBURSEMENTS	for each cate	for each category of the Detailed Summary Page		b 22 23 26 27		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)	mo ana addiess	or any political	JOHN HILLER LO	Someti continuations from such confinitee.		
NEW REPUBLICAN PAC						
Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC				Date of Disbursement		
Mailing Address 815 SLATERS LANE				03 24 2020		
City ALEXANDRIA		p Code 22314		FEC Identification Number		
Purpose of Disbursement ADMINISTRATIVE CONSULTING			001	Transaction ID : SB29.4303		
Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General ▼		20833.34		
State: District:	ı , , , , , , , , , , , , , , , , , , ,			Memo Item		
Full Name (Last, First, Middle Initial) B. NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE				Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City ALEXANDRIA		p Code 22314		FEC Identification Number		
Purpose of Disbursement TRAVEL EXPENSES		Г	002	C Towardia ID OPEN 1994		
Candidate Name			Category/ Type	Transaction ID: SB29.4304 Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General		610.66		
State: District:	Other (opcony)			Memo Item		
Full Name (Last, First, Middle Initial) C. NEW REPUBLICAN, LLC				Date of Disbursement		
Mailing Address 815 SLATERS LANE				03 24 2020		
City ALEXANDRIA		p Code 22314		FEC Identification Number		
Purpose of Disbursement ADMINISTRATIVE CONSULTING Candidate Name		[001	Transaction ID : SB29.4305		
	mont For		Category/ Type	Amount of Each Disbursement this Period 20833.34		
Senate President	ment For: Primary Other (specify)	General ▼		Memo Item		
State: District:				_		
SUBTOTAL of Disbursements This Page (optional).			·····•	42277.34		
TOTAL This Period (last page this line number only	')					

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SCHEDULE B (FEC Form 3X)	lles com	roto och salida (-)	FOR LINE		PAGE 12 OF 25		
ITEMIZED DISBURSEMENTS	for each of	rate schedule(s) category of the	(check only		22 26 27		
	Detailed S	Summary Page	21b 28a	22 28b	23 26 27 28c x 29 30b		
Any information copied from such Reports and Statem	l nents mav n	ot be sold or use					
or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
│ NEW REPUBLICAN PAC							
Full Name (Last, First, Middle Initial)							
A. NEW REPUBLICAN, LLC				Date of Dis	sbursement		
					D D / Y Y Y Y		
Mailing Address 815 SLATERS LANE				03	24 2020		
City	State	Zip Code			Castina Niverland		
ALEXANDRIA	VA	22314			fication Number		
Purpose of Disbursement TRAVEL EXPENSES			002	C			
Candidate Name					action ID : SB29.4306		
			Category/ Type	Amount of	Each Disbursement this Period		
Office Sought: House Disbursen	nent For:	I			602.16		
	Primary	General					
President State: District:	Other (spec	eify) 🔻		Memo	Item		
Full Name (Last, First, Middle Initial)							
B. NEW REPUBLICAN, LLC				Date of Dis	sbursement		
				M = M /	D D / Y Y Y Y		
Mailing Address 815 SLATERS LANE				03	24 2020		
,	State	Zip Code		FEC Identif	fication Number		
ALEXANDRIA Purpose of Disbursement	VA	22314					
ADMINISTRATIVE CONSULTING			001	C			
Candidate Name			Category/	Transaction ID : SB29.4307 Amount of Each Disbursement this Peri			
			Type				
Office Sought: House Disbursen		Canaral			20833.34		
	Primary Other (spec	General					
State: District:	(0)			Memo	Item		
Full Name (Last, First, Middle Initial)							
C. NEW REPUBLICAN, LLC				Date of Dis	sbursement		
Mailing Address 815 SLATERS LANE				03 24 2020			
		_					
,	State	Zip Code		FEC Identif	fication Number		
ALEXANDRIA Purpose of Disbursement	VA	22314		С			
TRAVEL EXPENSES			002		action ID : SB29.4308		
Candidate Name			Category/		Each Disbursement this Period		
Office Sought: House Disbursen	ent For:		Туре		341.96		
	Primary	General			55		
	Other (spec			Memo	Item		
State: District:				Wichio	nom		
					21777.46		
SUBTOTAL of Disbursements This Page (optional)			······		21/11.40		
TOTAL This Period (last page this line number only).							

SCHEDULE B (FEC Form 3X)	Use separate schedule	(a) I	FOR LINE NUMBER: PAGE 13 OF 25	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	e Concor only	y one) 22 23 26 27 28b 28c x 29 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na				
	ine and address of any po	micai committee to	o solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC				
/ 				
Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC	Date of Disbursement			
Mailing Address 815 SLATERS LANE			03 24 2020	
City ALEXANDRIA				
Purpose of Disbursement SHIPPING EXPENSES	001	Transaction ID : SB29.4309		
Candidate Name	Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼			123.76	
State: District:	(spoon)/ \		Memo Item	
Full Name (Last, First, Middle Initial) 3. NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE	Date of Disbursement 03 24 2020			
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number	
Purpose of Disbursement TRAVEL EXPENSES	С			
Candidate Name	Transaction ID : SB29.4310 Amount of Each Disbursement this Period			
Office Sought: House Disbursement For: Senate Primary General			2198.24	
President State: District:	Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial) NEW REPUBLICAN, LLC			Date of Disbursement	
Mailing Address 815 SLATERS LANE			03 24 2020	
City ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number	
Purpose of Disbursement SHIPPING AND NEW REPUBLICAN MERCHANDISE 001			Transaction ID : SB29.4311	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Senate President	ement For: Primary General Other (specify) ▼	1	4420.95 Memo Item	
State: District:			_	
SUBTOTAL of Disbursements This Page (optional).		·····•	6742.95	
TOTAL This Period (last page this line number only	/)			

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SCHEDULE B (FEC Form 3X)		arata aab = d.:l=/-\	FOR LINE		PAGE 14 OF 25
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check only one)		76 77
	Detailed	Summary Page	21b 28a	22 23 28c 28c 3	26 27 29 30b
Any information copied from such Reports and State	ments mav i	not be sold or use	ed by any pers		*I I I
or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
NEW REPUBLICAN PAC					
Full Name (Last, First, Middle Initial)					
A. NEW REPUBLICAN, LLC				Date of Disbursem	
Mailing Address 815 SLATERS LANE			03 24	2020	
		T			
City ALEXANDRIA	State VA	Zip Code 22314		FEC Identification I	Number
Purpose of Disbursement				C	
SHIPPING/MARKETING			001	Transaction ID) : SB29.4312
Candidate Name			Category/ Type	Amount of Each Di	sbursement this Period
Office Sought: House Disburse	ement For:		турс		775.15
Senate	Primary	General			,
State: District:	Other (spec	Сіту) ▼		Memo Item	
Full Name (Last, First, Middle Initial)					
B. NEW REPUBLICAN, LLC				Date of Disburseme	ent
Mailing Address 815 SLATERS LANE	03 / 24	/ Y Y Y Y Y 2020			
Midwing Address 010 SLATERS LAINE				24	2020
City	State VA	Zip Code 22314		FEC Identification I	Number
ALEXANDRIA Purpose of Disbursement		С			
SHIPPING	Transaction ID	: SB29.4313			
Candidate Name			Category/		sbursement this Period
Office Sought: House Disburse	ement For:		Туре		155.00
Senate Primary General					4 4
President Other (specify) State: District:				Memo Item	
State: District: Full Name (Last, First, Middle Initial)				_	
C. NEW REPUBLICAN, LLC				Date of Disburseme	ent
, 		M M / D D	/ Y Y Y Y Y		
Mailing Address 815 SLATERS LANE				03 24	2020
City	State	Zip Code		FEC Identification I	Number
ALEXANDRIA Purpose of Disbursement	VA	22314			
MARKETING 004			Transaction ID) · SB29 4314	
Candidate Name			Category/		sbursement this Period
Office Sought: House Disburse	ement For:		Type		2433.70
Senate	Primary	General		4	4 4
President	Other (spec	cify) ▼		Memo Item	
State: District:					
SUBTOTAL of Disbursements This Page (optional).					3363.85
,				7	150121 50
TOTAL This Period (last page this line number only	/)				159131.58

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 15 OF 25

FOR LINE 13 OF FORM 3X

			Potation cultimary rago TOTT EINE 13 OF FOTHWI 3X
AME OF COMMITTEE (In Ful NEW REPUBLICAN P.			Transaction ID : SC/10.4251
LOAN SOURCE Full Name CASTELLANOS, ALEJANDRO	e (Last, First, M D, , ,	iddle Initial)	N ☐ Memo Item
Mailing Address 399 NORTH	I QUAKER LANE	<u> </u>	General Other (specify) ▼
City		State	ZIP Code
ALEXANDRIA	ALEXANDRIA VA 2230		22304
Original Amount of Loan	Original Amount of Loan Cumulative Payment To		yment To Date Balance Outstanding at Close of This Period
1 7 7	20000.00	-	0.00 20000.00
TERMS Date Incurred	d	[pate Due Interest Rate Secured:
02 / D3 / Y	2015	M M / D L	/ 12/31/2015 0.00 % (apr) Yes X No
List All Endorsers or Guar	antors (if any)	to Loan Source	
1. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, M	iddle Initial)	,	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This	Page (optional)		20000.00
OTALS This Period (last page	e in this line on	ly)	20000.00
Carry outstanding halance on	ly to LINE 3 So	hedule D. for thi	s line. If no Schedule D. carry forward to appropriate line of Summary.

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 16
FOR LINE NUMBER: (check only one)

	9
X	10

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16 OF

NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal HOLTZMAN VOGEL Mailing Address 45 NORTH HILL DRIVE STE 100 State Zip Code WARRENTON VΑ 20186 Transaction ID: SD10.4316 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1428.75 0.00 1428.75 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal HOLTZMAN VOGEL Mailing Address 45 NORTH HILL DRIVE STE 100 City State Zip Code WARRENTON 20186 Outstanding Balance Beginning This Period Transaction ID: SD10.4317 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 3131.25 0.00 3131.25 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **HOLTZMAN VOGEL** Legal Mailing Address 45 NORTH HILL DRIVE STE 100 City State Zip Code WARRENTON 20186 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4318 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 1676.25 1676.25 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

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17 OF

NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal HOLTZMAN VOGEL Mailing Address 45 NORTH HILL DRIVE STE 100 State Zip Code WARRENTON VΑ 20186 Transaction ID: SD10.4315 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1976.25 1976.25 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal HOLTZMAN VOGEL Mailing Address 45 NORTH HILL DRIVE STE 100 City State Zip Code WARRENTON 20186 Outstanding Balance Beginning This Period Transaction ID: SD10.4323 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 217.50 217.50 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): PRINTING BOOKLETS NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4222 18012.93 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 18012.93 217.50 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 18
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OF

NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE State Zip Code **ALEXANDRIA** VΑ 22314 Transaction ID: SD10.4223 Outstanding Balance Beginning This Period 3769.58 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 3769.58 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.4224 2248.68 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 2248.68 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **BOOKLET PRINTING** NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4225 2117.29 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 2117.29 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

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NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): PRINTING - ADVERTISING/MARKETING NEW REPUBLICAN, LLC **BOOKLET** Mailing Address 815 SLATERS LANE State Zip Code **ALEXANDRIA** VΑ 22314 Transaction ID: SD10.4226 Outstanding Balance Beginning This Period 904.12 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 904 12 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.4227 2640.03 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 2640.03 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): MARKETING BOOKS NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4228 1352.72 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 1352.72 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 20
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20 OF

NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE State Zip Code **ALEXANDRIA** VΑ 22314 Transaction ID: SD10.4229 Outstanding Balance Beginning This Period 2377.72 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 2377.72 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING - JANUARY NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.4230 20833.34 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 20833.34 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING NEW REPUBLICAN, LLC **FEBRUARY** Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4231 20833.34 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 20833.34 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE State Zip Code **ALEXANDRIA** VΑ 22314 Transaction ID: SD10.4232 Outstanding Balance Beginning This Period 1667.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1667.73 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING MARCH NEW REPUBLICAN, LLC 2016 Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.4233 20833.34 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 20833.34 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4234 610.66 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 610.66 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING APRIL NEW REPUBLICAN, LLC 2016 Mailing Address 815 SLATERS LANE State Zip Code **ALEXANDRIA** VΑ 22314 Transaction ID: SD10.4235 Outstanding Balance Beginning This Period 20833.34 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 20833.34 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.4236 602.16 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 602.16 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING - MAY 2016 NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4237 20833.34 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 20833.34 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE State Zip Code **ALEXANDRIA** VΑ 22314 Transaction ID: SD10.4238 Outstanding Balance Beginning This Period 341.96 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 341.96 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): SHIPPING EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.4239 123.76 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 123.76 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSES NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4240 2198.24 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 2198.24 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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X 10 NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): STRATEGIC CONSULTING NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE State Zip Code **ALEXANDRIA** VΑ 22314 Transaction ID: SD10.4241 Outstanding Balance Beginning This Period 20833.34 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 20833.34 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): SHIPPING AND NEW REPUBLICAN NEW REPUBLICAN, LLC **MERCHANDISE** Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 Outstanding Balance Beginning This Period Transaction ID: SD10.4242 4420.95 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 4420.95 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): SHIPPING/MARKETING NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4243 775.15 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 775.15 20833.34 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)...... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): SHIPPING EXPENSE NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE State Zip Code **ALEXANDRIA** VA 22314 Transaction ID: SD10.4244 Outstanding Balance Beginning This Period 155.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 155.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **PRINTING** NEW REPUBLICAN, LLC Mailing Address 815 SLATERS LANE City State Zip Code **ALEXANDRIA** 22314 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4245 2433.70 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 2433.70 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1) SUBTOTALS This Period This Page (optional)..... 21050.84 2) TOTALS This Period (last page this line number only)..... 20000.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 41050.84 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶